FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000072645 (0) DOCUMENT #

BONITA TRUCK BROKERS. INC.

FILED Mar 19 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 10955 ENTERPRISE AVE. 10855 ENTERPRISE AVE. BONITA SPRINGS FL 34135 BONITA SPRINGS FL 34135 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/30/1996 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 21 65-0691180 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Zip 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ALVAREZ, ANGUS 10955 ENTERPRISE AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **BONITA SPRINGS FL 34135** 63 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE TITLE 1 1 TITLE ALVAREZ, ANGUS 1.2 NAME STREET ADDRESS 796 CASSENA ROAD 1.3 STREET ADDRESS NAPLES FL 34108 CITY+ST-7IP 1.4 CITY - ST - ZIP Change ■ Addition DELETE 2.1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change ☐ Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TATLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELFTE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with an address.

SIGNATURE:

SIGNATURE:

3-12-98